**DATE:** February 4, 2000 DSL-BQA-00-008

TO: Nursing Homes NH <u>06</u>

**FROM:** La Vern Woodford, Chief

Resident Care Review Section

**cc:** Susan Schroeder, Director

Bureau of Quality Assurance

## Timeline of Events Following Completion of a Survey

When a recertification or complaint survey results in a finding of noncompliance, it generates an enforcement timeline for subsequent events. This timeline is based on the federal Health Care Financing Administration's (HCFA) State Operations Manual, Chapter 50 of the Wisconsin Statutes, and the state Bureau of Quality Assurance (BQA) procedures related to licensing and certification requirements.

The chart in this memorandum provides an overview of the enforcement process by outlining major points on the timeline. It does not, however, include all requirements or contingencies. In the event of a conflict between the chart and an official notice from BQA or HCFA, or between the chart and a statute, regulation or rule, a nursing home should rely on the official notice and applicable legal requirements.

This chart has three columns. The first column identifies the day the event occurs following the completion of a survey. The timeline begins with Day 0, the day of the exit conference at the completion of the survey. All other days represent the number of days from the exit conference.

The second column describes an event that occurs, a deadline for action on a specified day, or in a few cases, an activity that occurs at an approximate point on the timeline.

The third column describes enforcement actions that BQA or HCFA may take if BQA finds new deficiencies during a time period when a nursing home has not corrected deficiencies from a prior survey. It describes what occurs if new findings of noncompliance are superimposed on the timeline generated by deficiencies from an earlier survey. There are two important points. First, any federal remedies proposed in an earlier letter may be modified depending on the scope and severity of any subsequent federal deficiencies issued prior to the nursing home achieving substantial compliance. Second, any new deficiencies become part of the timeline that was already in place. An example follows:

• BQA concludes a complaint investigation and holds the exit conference on January 1<sup>st</sup>. The nursing home has 90 days (until April 1<sup>st</sup>) to correct its federal deficiencies before HCFA or BQA imposes mandatory denial of payment for new admissions. BQA conducts a recertification survey on February 15<sup>th</sup>, before the nursing home has corrected its January 1<sup>st</sup> deficiencies, and issues new citations. The nursing home must correct both the old and the new citations prior to April 1<sup>st</sup> (Day 90) to avoid denial of payment for new residents.

New deficiencies become part of any ongoing enforcement timeline whenever there are outstanding deficiencies at the start of the new survey. A new enforcement timeline begins only when the nursing home is in substantial compliance with all federal regulations at the start of a survey.

The days in column one date from the exit conference. Day 90, for example, is ninety days from the exit conference. Day 23, Day 90, and Day 180 are fixed dates because they are the only days dependent upon the date of the exit conference. All other days are conditional and depend on the day the nursing home (NH) receives the Statement of Deficiencies (SOD). **The following chart assumes the SOD is received on Day 10.** If the SOD is issued earlier or later than Day 10, then all the days (except Days 23, 90, and 180) are affected accordingly. For example, if the SOD is received on Day 8 rather than Day 10, then the last day to request an in-person informal dispute resolution (IDR) is the eleventh day from the exit conference (Day 11) rather than Day 13 and the last day to appeal a state SOD is Day 18 rather than Day 20.

Day	Event	Effect of new deficiencies
Day 0	Exit conference/completion of survey.	
Day 10	NH receives SOD. NH notified of proposed remedies, or imposed	
(HCFA)	remedies if NH has no opportunity to correct.	
Day 13	Last day to request telephone or in-person IDR.	Until the nursing home comes into
(BQA)	To the state of th	substantial compliance with the
Day 17 (BQA)	Last day to submit supporting documentation for IDR. (This date can be modified through mutual agreement with the Regional Field Operations Director/RFOD.)	federal deficiencies issued on Day 10,
Day 20	Last date to submit plans of correction (POC).	any new federal deficiencies that are
(HCFA/Ch.50)	Last date to submit plans of correction (1 Oc).	cited follow these same time frames. For example, if an annual survey or
(Chapter 50)	Last date to appeal state violations (if SOD received on Day 10).	complaint investigation is conducted
(HCFA)	Last date to request IDR (desk review).	in conjunction with the revisit on Day 45 and new federal deficiencies are issued, all federal deficiencies must be corrected prior to Day 90 to avoid mandatory denial of payment for new admissions. A new enforcement track begins only when there are no outstanding federal deficiencies prior to the start of a survey. In addition, any remedies proposed in the Day 10 letter may be modified depending
Day 23 (HCFA)	Termination from Medicare/Medicaid program(s) if BQA cited	
	immediate jeopardy and the NH has not abated it.	
Day 24 (BQA)	Conduct informal dispute resolution (IDR) conference.	
Day 30 (Chapter 50)	Last date to approve plans of correction (POC).	
Day 31 (BQA)	Notify nursing home of IDR results.	
Day 45 (approximate)	Conduct revisit (must be done prior to Day 60). In some cases, the revisit may be conducted in conjunction with a recertification survey or a complaint investigation.	
Day 55	Issue SOD, if deficiencies found at the revisit. Notify NH of	upon the scope and severity of any subsequent federal deficiencies issued prior to the NH achieving substantial compliance.
(HCFA)	federal remedies (which may differ from those initially proposed in the Day 10 letter).	
Day 65 (HCFA/Ch.50)	Last date to submit POC, to request IDR, and to appeal state	
	violations (if SOD received on Day 55).	
Day 70 (HCFA)	Last date to appeal federal remedies if remedies were imposed with the issuance of the SOD on Day 10.	
Day 80	Conduct second revisit (if/when instructed by HCFA).	Until the nursing home comes into
(approximate)		substantial compliance with the
Day 90	Mandatory denial of payment for new admissions if nursing home has	federal deficiencies issued on Day 10
(HCFA)	not been in substantial compliance with federal regulations since Day 0.	or following, any new federal
(Chapter 50)	Suspension of new admissions under Chapter 50 if nursing home meets the criteria identified in s. 50.04(4)(d), Stats.	deficiencies that are cited follow these
Day 115	Last date to appeal federal remedies if remedies were imposed on Day	same time frames. Termination from the Medicare or Medicaid programs
(HCFA)	55 following the revisit.	will occur on Day 180 if a nursing
Day 120	NH receives notice of state forfeitures.	home has no survey between Day 10
(approximate)		and Day 180 in which it is in
Day 130	Last day to appeal state forfeitures (10 days following receipt of	substantial compliance with all federal
(approximate) Chapter 50)	forfeiture notice; assumes forfeiture notice received on Day 120.)	nursing home regulations.
Day 180	Termination from Medicare and/or Medicaid program(s) if NH is not in	
(HCFA)	substantial compliance with federal regulations.	

This chart outlines major points on the enforcement timeline. In the event of a conflict between the chart and an official notice from BQA or HCFA, or between the chart and a statute, regulation or rule, a nursing home should rely on the official notice and any applicable legal requirements.

If you have questions, please contact the Regional Field Operations Director (RFOD) assigned to your nursing home. The names, addresses, and phone numbers of the Regional Field Operations Directors are listed below.

Southern Regional Office 3514 Memorial Drive Madison, WI 53704-1162	Phyllis Tschumper, RFOD	(608) 243-2374 FAX: (608) 243-2389
Southeastern Regional Office 819 N. 6th St., Rm. 875 Milwaukee, WI 53203-1606	Tony Oberbrunner, RFOD	(414) 227-4908 FAX: (414) 227-4139
Northeastern Regional Office 200 N. Jefferson St., Suite 211 Green Bay, WI 54301-5182	Pat Benesh, RFOD	(920) 448-5249 FAX: (920) 448-5254
Northern Regional Office 1853 N. Stevens Street Rhinelander, WI 54501	Marianne Missfeldt, RFOD	(715) 365-2802 FAX: (715) 365-2815
Western Regional Office 610 Gibson St. Eau Claire, WI 54701-3667	Joe Bronner, RFOD	(715) 836-4753 FAX: (715) 836-2535